# Recertification Report - CARF Accredited Organization

Provider Name			Provider Number		Begin Cert Date	End Cert Date
BRIDGES HABILITATION SERVICES, INC.			1245305804		11/30/2009	11/30/2010
Organizational Practices	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Provider Retrained on:	Health, Safety, or Rights Issue?	Date QIP Due
	Staff Training (Wyoming Medicaid rules Chapter 45, Section 26)	Recommendation (Focused)	5 of 5 staff files reviewed (80%) contained documentation of background check results, Participant Specific Training, documentation that the staff met the qualifications for the service provided, and evidence of current CPR. 1 staff file did not have evidence of 1st Aid certification.		Yes	11/20/2009
	Staff Training (Wyoming Medicaid rules Chapter 45, Section 26)	In-Compliance	3 of 3 (100%) staff interviewed were able to articulate functional knowledge related to the participant with whom they were working.		No	
	Emergency Drills (CARF 1.E.)	In-Compliance	Documentation that a variety of drills was run on all shifts was present for all 4 sites reviewed, including documentation of follow up on concerns, as indicated.		No	

## Recertification Report - CARF Accredited Organization

Emergency Procedures during Transportation (CARF 1.E.)	In-Compliance	For 3 vehicles reviewed, all (100%), had emergency procedures available during transport, per the provider's policy as well as per applicable requirements.	No
Internal Inspections (CARF 1.E.)	In-Compliance	Documentation of internal inspections was present for the 4 sites reviewed, including documentation of follow up when needed. Frequency of internal inspections met applicable standards.	No
External Inspections (CARF 1.E.)	Suggestion	Documentation of annual external inspections was present for the 4 service locations reviewed. It is suggested that the inspection report specify by address which facilities were inspected.	No
Progress made on prior DDD Survey recommendations	In-Compliance	With the exception of the issues readdressed in this survey, the provider continues to make progress on recommendations from the previous survey	No
Progress made on prior CARF Survey recommendations	In-Compliance	With the exception of the issues readdressed in this survey, the provider continues to make progress on recommendations from the previous survey	No
Incident reporting standards (Wyoming Medicaid rules Chapter 45, Section 30)	In-Compliance	The policy and procedure was reviewed and met applicable standards.	No

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## Recertification Report - CARF Accredited Organization

	Incident reporting standards (Wyoming Medicaid rules Chapter 45, Section 30)	In-Compliance	3 of 3 staff interviewed (100%) were able to articulate functional knowledge of the Division's Notification of Incident Reporting process.		No	
	Complaint and Grievance (CARF 1.D.)	In-Compliance	The policy and procedure was reviewed and met applicable standards. The provider showed evidence of appropriate follow up when complaints were identified.		No	
	Rights of Participants (Wyoming Medicaid rules, Chapters 45, Section 26, CARF Section 1)	In-Compliance	The policy and procedure was reviewed and met applicable standards		No	
	Rights of Participants (Wyoming Medicaid rules, Chapters 45, Section 26, CARF Section 1)	Recommendation (Focused)	2 of 3 staff interviewed were able to demonstrate functional knowledge of participant rights and rights restrictions.		Yes	11/20/2009
	Behavior Plans (Chapter 45, Section 29)	In-Compliance	3 Positive Behavior Support Plans were reviewed and met the applicable requirements.		No	
	Restraint standards (Chapter 45, Section28)	In-Compliance	The policy and procedure was reviewed and met applicable standards.		No	
	Transportation Requirements (CARF 1.E.9)	In-Compliance	3 vehicles were reviewed and all met current requirements.		No	
Participant Specific Reviews	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Provider Retrained on:	Health, Safety, or Rights Issue?	Date QIP Due
	Implementation of Individual Plan of Care (Wyoming Medicaid rules Chapters 41, 42 and 43, Section 8)	In-Compliance	4 participant files were reviewed, and through a review of documentation, observation, and interview, each plan of care met the applicable standards.		No	

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Recertification Report - CARF Accredited Organization

	Releases of Information (CARF 2.B.)	Recommendation (Focused)	4 participant files were reviewed all of which contained releases of information which met applicable standards, except for participant #2 which had a release of information signed by guardian but the rest of the information was left blank.		No	12/8/2009
	Emergency Information (CARF 2.B.)	In-Compliance	4 participant files were reviewed, all of which contained current and thorough emergency information.		No	
	Objectives and goal tracking (Wyoming Medicaid Rules Chapter 41-43)	In-Compliance	3 of 3 participant files reviewed included documentation of tracking of progress made on objectives, as required per Chapter 45, Section 11.		No	
	Billing and Documentation (Wyoming Medicaid Rules Chtr. 45 Sect. 27)	In-Compliance	4 participant files were reviewed, including documentation of service provision and billing for at least one service area in each file. The documentation and billing reviewed met the documentation standards.		No	
Case Management Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Provider Retrained on:	Health, Safety, or Rights Issue?	Date QIP Due
	Case manager monthly/quarterly documentation meets requirements of Chapters 41, 42 and 43, and DD rule, Chapter 1	In-Compliance	4 files were reviewed, which met the standards for monthly/quarterly documentation.		No	

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	Team meeting notes (Chapters 41, 42, and 43 and DD rule, Chapter 1)	In-Compliance	Team meeting notes were present for all applicable files that were reviewed.		No	
	Development and Tracking of Objectives (Chapters 41, 42, and 43 and DD rule, Chapter 1)	In-Compliance	4 of 4 files reviewed met applicable standards for the development and tracking of objectives.		No	
	Monitoring implementation of the IPC (Chapters 41, 42, and 43 and DD rule, Chapter 1)	In-Compliance	4 participant files were reviewed and documentation of monitoring met applicable requirements.		No	
Residential Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Provider Retrained on:	Health, Safety, or Rights Issue?	Date QIP Due
	Organization maintains a healthy and safe environment – all service settings (CARF 1.E.10 Chapter 45, Section 23)	In-Compliance	3 residential sites were visited, and all showed evidence of maintaining a healthy and safe environment		No	
	Organization meets CARF Standards on Community Housing (CARF Section 4.J)	In-Compliance	Through observation, interview, and a review of documentation, the provider is meeting these standards.		No	
	The organization meets the standards in Chapter 45, section 23)	In-Compliance	Through observation, interview, and a review of documentation, the provider is meeting these standards.		No	

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### Recertification Report - CARF Accredited Organization

Day Habilitiation, Employment Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Provider Retrained on:	Health, Safety, or Rights Issue?	Date Due	QIP
	The organization meets the standards for Community Integration (CARF 4.E)	In-Compliance	The organization meets the standards, as evidenced by documentation review and service observation. The provider continues to offer numerous and varied opportunities for community access. Participants specifically expressed satisfaction with this aspect of their services.		No		
	Organization maintains a healthy and safe environment – all service settings (CARF 1.E.10 Chapter 45, Section 23)	In-Compliance	Through documentation review and service observation, the provider showed evidence of maintaining a healthy and safe environment in all service settings.		No		
	Organization meets the standards for the service provided (CARF Standards and Medicaid rules)	In-Compliance	The organization meets the standards, as evidenced by documentation review, participant interview, and service observation.		No		
Other Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Provider Retrained on:	Health, Safety, or Rights Issue?	Date Due	QIP
	Organization maintains a healthy and safe environment (CARF 1.E.10 and WMR Chapter 45, Section 23)	In-Compliance	One Respite location was observed, which provided evidence of maintaining a healthy and safe environment		No		
	Organization meets the standards for the service provided (CARF Standards and WMR Chapter 41-45)	In-Compliance	6 months of Respite documentation was reviewed for one participant and met applicable standards.		No		

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